



**SCHOLARSHIP
DONATION**

YES! I would like to make a donation to the CASE Scholarship in the amount of:

\$50 \$100 \$250 \$500 Other Amount \$ _____

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Firm Address (line 2): _____

City, State Zip: _____

Phone #: _____ Email: _____

Payment: Check (*payable to ACEC/CASE Scholarship Fund*) Visa MC Amex

Card #: _____

Name on Card: _____

Expiration Date: _____

Signature: _____

**Thank you for your contribution to the CASE Scholarship Fund.
Remember, all donations toward the program may be eligible for U.S. tax deduction.**

SEND THIS FORM TO:
ACEC/CASE Scholarship Fund
1015 15th Street NW, 8th Floor, Washington, DC 20005
FAX TO: 202.898.0068
EMAIL TO: **Heather Talbert** htalbert@acec.org OR **Kerri L. McGovern** kmcgovern@acec.org